LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2016-17

019 - Calgary-Mackay-Nose Hill - McPherson, Karen For Expenses Processed July 1 - September 30, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)	•		
Transportation			
Fuel and Minor Maintenance - \$		\$439.43	\$1,474.59
MLA Parking Cap - \$	\$900.00	\$134.84	\$299.77
Other Travel - Parking - \$		\$27.96	\$27.96
Member Travel (overnight stay in constituency) - \$		400.15	A140.00
Taxi, Bus Travel - \$		\$26.15	\$140.39
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			£400 0E
Member Travel (Meal Per Diems) - \$			\$496.95
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$11,580.00
Travel Accommodations Allowance		\$284.08	\$284.08
Travel Accommodations Allowance (days; 10 max) - NF	10	2	2
Other			
Hosting - \$		\$4,938.89	\$4,938.89
Non-Financial Reporting			
Hea of Drivete Automobile (42 E costs per les)			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF	35,000		
Special Trips (5 trips per year) - NF	55,000	1	1
Special Trips (Surps per year) - Ni	3		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52		3
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - Reported on CAD dollar amount of actual expense NF - Reported based on number of trips, number of kilometres, or number of days Budget reported is the maximum annual amount that may be claimed

GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt

Element Fleet Management

FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC

PAGE - 157 OF 260 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-19-K MCPHERSON

BFDF290001

CLIENT NO.

NO DU CLIE
INVOICE DA
DATE DE LA
INVOICE NO
NO DE LA F

LNI NO.	
DU_CLIENT	
DICE DATE	08/01/16
E DE LA FACTURE	00/01/10
DICE NO.	0006443170
DE LA FACTURE	

NO. NO. O'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	NO. DE	KM AUTHORIZE KM AUTORISE	NO. DE REFERENCE	SUP NOM	UPPLIER NAME PLIER LOCATION DU FOURNISSEUR DINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	MCPHERSON				000439364165 07/03/16		АВ	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	46.5	1.00	44.28 44.28 .47- 43.81	2.15 2.15 2.15	46.43 46.43 .47- 45.96
					000438839337 07/02/16		COOPERATIVES L MIT AB	ED UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.5	.94 12.99	34.63 12.99 47.62	1.73 .65 2.38 2.38	50.00 50.00
		UNI	IT TOTAL / TOT	UNITE				FUEL CITY / OTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	85.0		91.90	4.53	96.43 .47- 95.96
	BKDN TOTALS / TOTAUX (01-19	CODIFICATION UN	NITS / VEHIC	1				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	85.0		91.90	4.53	
								BKDN TOTALS / TOTAUX CODIFICA DISCOUNT / RABAIS TOTAL / TOTAL	TION				96.43 .47- 95.96

GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC

> PAGE - 159 OF 262 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-19-K MCPHERSON

IV-19-K MCF

: :

CLIENT NO.

NO DU CLIENT
INVOICE DATE
DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE



BFDF290001

T NO O. NITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE		REFERENCE NO ACTIVITY DAT NO. DE REFERENCE DATE DE LA TRANS.		TION SSEUR	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST	EXTENDED PRICE 	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DI MONTAN TOTAL D
	MCPHERSON					SHELL CANADA INC CLARESHOLM	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	51.4	1.02	49.84 49.84	2.49 2.49 2.49	52.33 52.33
					000441424380 08/01/16	IMPERIAL OIL EDMONTON	AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	35.2	.82	27.61 27.61	1.38 1.38	28.99 28.99
					000440374472 07/30/16	FEDERATED COOPERATIV	VES L MITED AB	GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	14.99	14.99	.75 .75	15.74 15.74
					000440053993 07/28/16		VES L MITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.7	.97	56.08 56.08	2.80 2.80 2.80	58.88 58.88
					000440051894 07/26/16		VES L MITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	55.3		47.63 47.63	2.38 2.38 2.38	50.01 50.01
					000439847596 07/20/16		/ES L MITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.9	.90	50.71 50.71	2.54 2.54 2.54	53.25 53.25
		UNI	T TOTAL / TOT	UNITE				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	261.5		246.86	12.34	259.20
	KDN TOTALS / TOTAUX (1-19	CODIFICATION UN	NITS / VEHIC	1				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	261.5		246.86	12.34	
								BKDN TOTALS / TOTAUX CODIFICATION	ON				259.20

GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118

Memb	er Name:	Karen McPherson
Claima	nt Name:	Karen McPherson
Expens	se Catego	ry: Fuel and Minor Maintenance
For hos	sting, sele	ct one:
_ Inc	dividual Co	onstituent(s)
Ind	dividual St	akeholder(s)
☐ Gr	oup:	\$ 47.62 + GST
Purpos	e:	



======= TRANSACTION RETORD ========= Centex Beddington

#10 176 Bedford Drive, N.E. Calgary, Alberta T3K2M9

403 730-2188

2112 203 01

1034206

Lane#: 1

GST #895917201RT0001 Cashien: Aib

Amount

PrePaid Tuel Pump#3

\$50,00#

GST INCLUDED: \$2.38

Sub Total: Total:

\$50.00 \$50.00

Type: PreAuth

DATE: 2016/07/14

TIME: 16:49:16

TYPE: Pre-Auth

Interac

A0000002771010

DATE/TIME: 07/14/2016 16:49:16

REFERENCE #: 001736077

TVR: 0080008000

TD : 607FC1085B321F84

TCC: 0124

TCD: 0124

MERCHANT :

20274845

TERM :

FL2027484501

TRANS #:

1034206

EMPLOYEE: CASH REG:

1001

1

00 APPROVED THANK YOU

ACCT: Debit Checuing

s 50.00

Retain this copy for your record Store Copy/Copie du magasin

For hosting, select one:	
Individual Constitu	ent(s)
Individual Stakehol	
Group:	\$ 53.05 + GST
Purpose:	



Calgary Co-op Beddington Gas Bar 8220 Centre Street NE Calgary AB (403) 299-4360 GST# R100730894

lty Name	Price	Total
(Carried and Carried and Carri		
1 REGULAR GASOLIN		55.70
Pump:	4 59.000	
Litres: Price / Litre:		
11/10/2/		
Chestat		
Subtotal GST		
GST [Inc] Pumps]		
		17
Total		
DRIGINAL		
	12.7114.22704	
YPE: Purchase	INTER	42
COT: FLASH DEFAULT	\$	-
MANUSCRIPTOR DESCRIPTION OF THE PERSON OF TH	470	-
ARD NUMBER:		TO FIN C
ATE/TIME: 07/09 EFERENCE #: 00100	72010 15:09:9 17700	
ERM: 56232		
UTHOR # :		

00 APPROVED - THANK YOU 001

agree to pay the above total amount according to the card issuer agreement (merchant agreement if credit voucher)

> In 2015 Calgary Co-on Members Saved 9 pents per litre on fuel purchases!

3 cents-Revved Up Revards

The American Express® Corporate Card Statement of Account

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Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6



Prepared For KAREN MCPHERSON LEGIS ASSEMBLY OF AB Membership Number

Date July 16, 2016

New Charges including Delinquency Assessment, if any New Balance \$ Previous Balance Payments and Credits

Statement includes payments and charges received by July 16, 2016

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Credit Limit Summary On July 16, 2016 Listing of Charges and Credits

Total Credit Limit \$

Available Credit Limit \$

Amount \$

Page 1 of 3

July 5

Payment Received Thank You

New Transactions for KAREN MCPHERSON

Amount \$

July 15

CalgParkAuth 2064007 CALGARY **GOVERNMENT SERVICES**

18.00

Total New Transactions for KAREN MCPHERSON

\$17.15+ GST

/SEL/

† Please detach here †

AMERICAN EXPRESS®

Payment Options PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.

Phone and Internet banking arranged through your financial institution

Your local bank branch

 Automatic banking machines Do Not Enclose Cash

000141



KAREN MCPHERSON LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E9





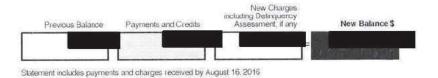
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Prepared For KAREN MCPHERSON LEGIS ASSEMBLY OF AB August 16, 2016

Page 1 of 4



\$1.67 + GST

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Total Credit Limit \$ Available Credit Limit \$ Credit Limit Summary On August 16, 2016 Amount \$ Listing of Charges and Credits Foreign Spending 57.03 Payment Received Thank You August 9 CR Amount \$ New Transactions for KAREN MCPHERSON

CalgParkAuth 2079198 CALGARY GOVERNMENT SERVICES 0.75 August 3 August 3

CalgParkAuth 2079236 CALGARY 1.00 GOVERNMENT SERVICES

1 Please detach here 1

/SEL/

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Payment Options PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.

Phone and Internet banking arranged through your financial institution

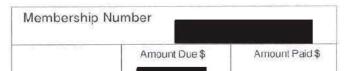
Your local bank branch

Automatic banking machines Do Not Enclose Cash





KAREN MCPHERSON LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E9





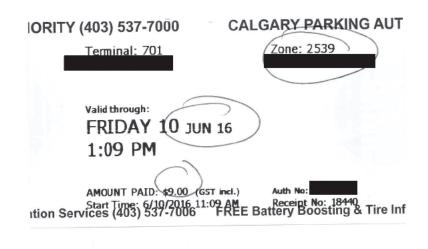
Membe	r Name:	Karen McPherson		
Claiman	t Name:	: Karen McPherson	2	
Expense	e Catego	ry: Member Parking		
For host	ing, sele	ect one:		
☐ Indi	vidual C	onstituent(s)		
Indi	vidual St	takeholder(s)		
☐ Gro	up:		\$ 26.67 + GST	
Purpose	ŧ			

THIS SIDE UP-ON DASH

Member Name: Karen McPherson	ž
Claimant Name: Karen McPherson	u .
Expense Category: Member Parking	
For hosting, select one:	
☐ Individual Constituent(s)	
☐ Individual Stakeholder(s)	
Group:	\$3.00 + GST
Purpose:	



Member Name: Karen McPherson							
Claimant Name: Karen McPherson							
Expense Category: Member Parking							
For hosting, select one:							
Individual Constituent(s)							
Individual Stakeholder(s)							
\$8.57 + GST							
_							
Purpose:							



Member Name: Karen McPherson	_ 1 5
Claimant Name: Karen McPherson	_
Expense Category: Member Parking	THORITY (403) 537-7000 CALGARY PARKING AL
For hosting, select one: Individual Constituent(s) Individual Stakeholder(s) Group: Group:	Valid through: FRIDAY 10 JUN 16 6:00 PM
Purpose:	AMOUNT PAID \$19.70 (GST incl.) Auth No: START TIME: 6/10/2016 3:41 PM RECEIPT NO: 157959 Iflation Services (403) 537-7006 FREE Battery Boosting & Tire I

The American Express® Corporate Card **Statement of Account**

New Charges including Delinquency

Assessment, if any

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\$59.02 + GST

Page 1 of 3



Prepared For KAREN MCPHERSON LEGIS ASSEMBLY OF AB

Previous Balance

September 16, 2016

New Balance \$

Statement includes payments and charges received by September 16, 2016

Please see "About Your Statement" section for important information.

Payments and Credits

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Total Credit Limit \$ Available Credit Limit \$ Credit Limit Summary On September 16, 2016 Amount \$ Listing of Charges and Credits September 1 Payment Received Thank You Amount \$ New Transactions for KAREN MCPHERSON August 16 CalgParkAuth 2090134 CALGARY 14.10 **GOVERNMENT SERVICES** 0.25 CalgParkAuth 2092746 CALGARY August 19 **GOVERNMENT SERVICES** 5.37 August 19 CalgParkAuth 2092748 CALGARY GOVERNMENT SERVICES 6.00 August 19 CalgParkAuth 2092731 CALGARY GOVERNMENT SERVICES IMPARK00030006U 24.00 CALGARY August 30 Goods or Services CalgParkAuth 2107845 CALGARY GOVERNMENT SERVICES 12.25 September 7

1 Please detach here 1

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Payment Options
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.

Total New Transactions for KAREN MCPHERSON

Phone and Internet banking arranged through your financial institution

Your local bank branch

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Page 1 of 3

Prepared For KAREN MCPHERSON LEGIS ASSEMBLY OF AB

New Charges including Delinquency Assessment, if any Previous Balance Payments and Credits New Balance \$

Statement includes payments and charges received by July 16, 2016

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Credit Limit Summary On July 16, 2016

Total Credit Limit \$

Available Credi

Date

July 16, 2016

Amount \$

Listing of Charges and Credits

Payment Received Thank You

New Transactions for KAREN MCPHERSON

Amount \$

July 6

July 5

CALGARY AIRPORT AUTH CALGARY **GOVERNMENT SERVICES**

29.35

Total New Transactions for KAREN MCPHERSON

\$ 27.96 + GST

† Please detach here † AMERICAN EXPRESS®

Payment Options PLÉASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.

Phone and Internet banking arranged through your financial institution

Your local bank branch

 Automatic banking machines Do Not Enclose Cash

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KAREN MCPHERSON LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E9





Me	mber Name:	Karen McPherson		
Cla	imant Name:	Karen McPherson		
Exp	ense Catego	ry: Taxi, Bus Travel		
For	hosting, sele	ct one:		
	Individual C	onstituent(s)		
	Individual St	akeholder(s)	# 26.15 COTT	
	Group:		\$ 26.15 + GST	
Pur	pose:			

ASSOCIATED CAB ALLIED LIMOUSIN 307-41 AVENUE NE CALGARY AB T2E 2N4 (403) 299-1111

SALE

MID. 4189233 TID JV189233 Batch #: 179

06/26/16

REF# 00000001 SEQ: 179001001001 15:43:31

MASTERCARD

AMOUNT TIP TOTAL \$24.10 \$3.20 \$27.30

00 - APPROVED - 001

MasterCard
AID. A0000000041010
TVR: 00 00 00 80 00
TSI: E8 00

THANK YOU

CUSTOMET - TY



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

		0 1	a circa j	/-Nose Hill
Date:	4/19/20	16		
Allowance in Edmonton -	Claimed An	nually		
Edmonton - Claimed Ann	nually			
oorary	N	0		
\$ 1,930.00		x 12 =	\$	23,160.00
all records which support	the annual	amount i	dent	ified above.
✓ 12 Monthly Pa	yments			
				없는 그렇지 않아내면 뭐 하다 경우 아들아 살았다. 하고 말이 시리를 하고 있다면 그렇지 않는데 아름이 없는 그렇다.
	Edmonton - Claimed Annorary ich. Yes \$ 1,930.00 all records which support	Edmonton - Claimed Annually Dorary Sch. Yes No. \$ 1,930.00 all records which support the annual 12 Monthly Payments 1 authorize 12 monthly pay	Edmonton - Claimed Annually Edmonton - Claimed Annually Dorary Sich. Yes No \$ 1,930.00 x 12 = all records which support the annual amount in the control of the control	Edmonton - Claimed Annually Forary The contract of the second of the s

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

July 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: McPherson, Karen	Constituency: Calgary-Mackay-Nose Hill
Employee#:	Date: 4/19/2016
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year. Fiscal Year: 2016-2017	n Edmonton - Claimed Annually
Have you provided documents evidencing your Tem Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please att	
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00
Please Note: The Member is responsible for retaining	g all records which support the annual amount identified above.
Claim Payment Authorization (please check)	✓ 12 Monthly Payments I authorize 12 monthly payments in the amount specified above for the
<u> </u>	entire fiscal year. This monthly amount is static for the entire fiscal year

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

August 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: McPherson, Karen	Constitu	iency: Calgary-Ma	ckay-Nose Hill	
Employee #:	Date:	4/19/2016		
Claim Type: Temporary Residence Accommodation A	llowance in Edmonton - Cla	aimed Annually		
Temporary Residence Accommodation Allowance in B Maximum of \$23,160 per fiscal year. Fiscal Year: 2016-2017	Edmonton - Claimed Annua	ally		
Have you provided documents evidencing your Temp Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attac		☐ No		
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 12 =	\$ 23,160.00	
Please Note: The Member is responsible for retaining a	all records which support th	e annual amount i	dentified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly Paym		the amount specified above for	the

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

September 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature



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Prepared For KAREN MCPHERSON LEGIS ASSEMBLY OF AB September 16, 2016

New Charges including Delinquency Assessment, if any Previous Balance Payments and Credits New Balance \$ Statement includes payments and charges received by September 16, 2016

\$284.08 + GST

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Credit Limit Summary On September 16, 2016 **Total Credit Limit \$**

Available Credit Limit \$

Amount \$

Page 1 of 3

Listing of Charges and Credits

September 1

Payment Received Thank You

New Transactions for KAREN MCPHERSON

Amount \$

August 23

COAST LETHBRIDGE HOT LETHBRIDGE Arrival Departure 21/08/16

23/08/16

298.28

Total New Transactions for KAREN MCPHERSON

† Please detach here †

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Phone and Internet banking arranged through your financial institution

Your local bank branch

· Automatic banking machines Do Not Enclose Cash

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KAREN MCPHERSON LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E9

Membershi	p Number	
	Amount Due \$	Amount Paid\$



Member Name: Karen Michnerson	
Claimant Name: Karen McPherson	
Expense Category: Hosting	
999 - A. O. CONT 200 - 200	
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	\$
Purpose:	
Stampede Luncheon	



QUOTE

Billing Address #308 1030- 16th Ave SW Calgary, AB T2R 1N1 403.874.7920 QUOTE #: DATE: CUSTOMER NAME:

Item Description	Quantity	Unit Price	Total Price
Off the Grill Package	400	\$10.50	\$4200.00
	Sag		
17.57			

Sub-Total	\$4200.00
GST 5%	Exempt
Delivery/Set Up	\$65.00
Gratuity 15%	\$630.00
Discounts	
Total	\$4895.00

Notes:

Thank you so much for your business!
50 % Deposit is required to secure your event date.
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☐ Individual Constituent(s) ☐ Individual Stakeholder(s) ☐ Group: Bemmunty Association		iosting
Individual Stakeholder(s) Group: Bermunity Association	For hosting, select one:	V.A.
S Group: Bermunity Association	Individual Constituent	:(S)
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CODE: 062816 184801 9879 01545

Member Name: Karen McPherson
Claimant Name: Karen McPherson
Expense Category: Hosting
For hosting, select one:
Individual Constituent(s)
Individual Stakeholder(s)
M Group: St. Joseph Elementary School
Purpose:
Water & Juice for an event
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\$28.91



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ACCT: FLASH DEFAULT	\$	28.91
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